REMARKS

This is in response to the Office Action of 05/05/08.

Claims 1-7, 9-16, and 19 are pending.

The Office Action rejects claims 1-7, 9-16, and 19 under 35 USC 103(a) as being unpatentable over Bryant et al. (US 5,772,085) in view of Hauser (US Pat. 6,155,251), and claim 16 as being obvious over Bryant et al. in view of Hauser, in further view of Dickinson et al.

Applicants respectfully traverse.

While Bryant discloses a valve as in the claimed invention, the Hauser adaptor is not designed to work with this type of valve. The two pieces of prior art could not be functionally combined.

The claimed invention relates to an actuator housing that operates with a valve that is essentially the opposite as the valve used in Hauser. Hauser merely discloses a conventional MDI valve with an adaptor whereby the drug dose is dispensed when the unit is depressed so the valve stem moves into its inner position. If the Hauser adaptor were used with the Bryant valve, the MDI would not fire upon inhalation as required because the valve stem would merely be moved to its inner priming position. It would fire at the wrong time when the unit was released.

In this regard, the present claims expressly require the adaptor mechanism to operate the opposite, so that upon release of the mechanism by the user the valve stem moves into its inner closed or priming position. Hauser does the opposite such that upon release the valve stem moves back to its outer position.

Referring to claim 1 (with underlining added):

Claim 1. An adaptor for use with a container equipped with a dispensing valve that comprises a valve stem movable between an <u>inner closed or priming position</u> and <u>an outer dispensing position</u>, for dispensing doses of pressurized aerosol formulation, the adaptor being adapted to receive the container and comprising an actuation mechanism, said actuation mechanism being arranged such that the user will operate the mechanism by applying a depressive or squeezing force and the dose will be dispensed upon said depressive or squeezing force and said actuation mechanism being arranged such that upon release of the mechanism by the user, the valve stem of the dispensing valve will be moved automatically into its closed or priming position.

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Accordingly, the combination of Bryant et al. with Hauser does not anticipate or render obvious the present claims. Reconsideration and favorable action are therefore requested.

Respectfully submitted,

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